SENATE BILL REPORT SHB 1247

As of March 9, 2023

Title: An act relating to licensure for music therapists.

Brief Description: Licensing music therapists.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by

Representatives Reed, Harris, Mena, Berry, Simmons, Morgan, Slatter, Ryu, Goodman,

Donaghy, Reeves, Sandlin, Stearns and Fosse).

Brief History: Passed House: 2/27/23, 82-13.

Committee Activity: Health & Long Term Care: 3/09/23.

Brief Summary of Bill

- Establishes music therapists as a new health profession requiring licensure to practice in Washington.
- Creates the Music Therapy Advisory Committee within the Department of Health.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Staff: Andie Parnell (786-7439)

Background: The Department of Health (DOH) certifies, licenses, and regulates health professions in Washington State. Most of these health professions are governed by a board, commission, or advisory committee which are supported by DOH. Each health profession's scope of practice is defined in law and each profession must fully cover the costs of its licensing and disciplining activities through fees for licensing, renewal, registration, certification, and examination. All health professions are subject to the Uniform Disciplinary Act (UDA). Under the UDA, DOH or a professional board or commission may take disciplinary action against a licensed health professional for unprofessional

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conduct. Disciplining actions include fines, license revocations, and practice restrictions.

Music therapy is the use of music within a therapeutic relationship to address an individual's physical, emotional, cognitive, or social needs. Music therapists may practice as part of an interdisciplinary team that includes medical, mental health, occupational therapy, physical therapy, or educational professionals. Music therapists may work in hospitals, clinics, rehabilitative facilities, mental health centers, residential and day facilities, substance use disorder treatment facilities, correctional facilities, schools, or in private practice. Currently in Washington State, music therapy is not a licensed health profession.

In December 2012, DOH issued a sunrise review related to a proposal to certify music therapists. In the review, DOH recognized the therapeutic benefit of music to address the cognitive, emotional, physical, social, or functional needs of clients, but found that the proposal did not meet the sunrise criteria to support certification.

Summary of Bill: Music therapy is created as a new health profession to be regulated by the Secretary of Health (Secretary). "Music therapy" is defined as the clinical and evidence-based use of music interventions to accomplish individualized goals of music therapy clients by employing the following strategies and tools:

- accepting referrals for music therapy services from health care or educational professionals, family members, or caregivers;
- conducting music therapy assessments of a client to determine appropriate music therapy services;
- developing and implementing individualized music therapy treatment plans that identify goals, objectives, and strategies of music therapy appropriate for clients;
- using music therapy techniques such as improvisation, performance, receptive music listening, song writing, lyric discussion, guided imagery with music, learning through music, and movement to music;
- during the provision of music therapy services to a client, collaborating, as applicable, with the client's treatment team, including physicians, psychologists, licensed clinical social workers, occupational therapists or other mental health professionals;
- during the provision of music therapy services to a client with a communication disorder, the licensed professional music therapist must collaborate and discuss the music therapy treatment plan with the client's audiologist, occupational therapist, or speech-language pathologist;
- when providing educational or health care services, a music therapist may not replace
 the services provided by an audiologist, occupational therapist, or a speech-language
 pathologist;
- evaluating a client's response to music therapy techniques and the individualized music therapy treatment plan;
- any necessary modification of the client's individualized music therapy treatment plan;
- any necessary collaboration with other health care professionals treating a client;
- minimizing barriers that may restrict a client's ability to receive or fully benefit from

- music therapy services; and
- developing a plan for determining when the provision of music therapy services is no longer needed.

Music therapy does not include screening, diagnosis, or assessment of any physical, mental, or communication disorder.

The Music Therapy Advisory Committee (advisory committee) is created within DOH consisting of five appointed members including three music therapists who practice in Washington State, a licensed health care provider who is not a music therapist, and a consumer. All members must be familiar with the practice of music therapy. The advisory committee must provide expertise and assistance to DOH to develop regulations and establish standards of practice and professional responsibility for music therapists. DOH must consult with the advisory committee for issues related to music therapy licensure and renewal. DOH must provide analysis of disciplinary actions taken, appeals, denials, or revocations of licenses at least once per year.

Beginning January 1, 2025, an individual may not practice music therapy or use the title music therapist without holding a license issued by the Secretary. This act does not prohibit or restrict the practices, services, or activities of the following: persons credentialed in another profession that uses music incidental to the practice of that profession, if not represented as a music therapist; persons whose training and certification attest to the person's preparation and ability to practice the person's certified profession, if not represented as a music therapist; and the practice of music therapy by students enrolled in a music therapy education program.

A music therapy license must be renewed biennially. To be licensed as a music therapist, an applicant must:

- be at least 18 years old;
- be in good standing in any other jurisdiction where the applicant is licensed or certified as a music therapist;
- successfully complete an approved academic and clinical training program for music therapy;
- successfully pass an examination administered or approved by the Secretary; and
- pay any required fees.

The Secretary must consult with the advisory committee and consider standards adopted by national certification boards for music therapy when approving academic and clinical training programs and examination requirements.

Music therapists may not evaluate, examine, instruct, or counsel on speech language, communication, and swallowing disorders and conditions. A licensed music therapist is prohibited from representing to the public that the individual is authorized to treat a communication disorder, but a licensed music therapist is not prohibited from working with

clients who have a communication disorder and address communication skills.

Before providing music therapy services to a client for an identified clinical or developmental need, it is recommended that the licensee review the client's diagnosis, treatment needs, and treatment.

Before providing music therapy services to a student for an identified educational need, the licensed music therapist must review the student's diagnosis, treatment needs, and treatment plan with the individualized family service plan's team or the individualized education program's team.

The Secretary has disciplining authority in accordance with the UDA and must adopt rules for administering the licensure for music therapists. The Secretary may perform certain administrative functions related to the music therapist profession. These administrative functions include adopting rules, establishing fees and forms, issuing and denying licenses, administering and grading examinations, determining reciprocity equivalency, and implementing a consumer education program.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: The bill contains several effective dates. Please refer to the bill.

Staff Summary of Public Testimony: PRO: Music therapy provides significant health benefits to vulnerable patients and opens venues for expression. Establishing music therapy as a licensed profession protects patients and allows Medicaid reimbursement for providers. Licensure would make music therapy more equitable and available to those who did not previously have access.

CON: All music and all art is therapy. Regulating and licensing artists is not a good idea because art does not cause harm and anyone should be able to participate in the profession.

Persons Testifying: PRO: Representative Julia Reed, Prime Sponsor; Michael Moran, Music Therapy Task Force-facilitator for virtual panel; Dr. Arun Vijay, Music Therapy Task Force; Evelyn Stagnaro, Music Therapy Task Force Co-Chair; Melissa Johnson, Washington Speech-Language-Hearing Association.

CON: C Davis.

Persons Signed In To Testify But Not Testifying: No one.